

## **REASONABLE MODIFICATIONS REQUEST FORM**

Please complete this form to request a reasonable modification of PVTA bus services. Submit the completed form to the Reasonable Modification Coordinator via FAX at 413-737-2954, via mail at 2808 Main St., Springfield, MA 01107 or via email at rarequests@pvta.com.

| Date:                   | Name:              | ·       | <br><u>_</u> |
|-------------------------|--------------------|---------|--------------|
| Phone Number:           |                    | Email:  | <br>         |
| Address:                |                    |         |              |
|                         |                    |         |              |
| Description of Requests |                    |         | <br>         |
|                         |                    |         |              |
|                         |                    |         | <br>         |
|                         |                    |         |              |
|                         |                    |         |              |
| Location & Routes Used  | d:                 |         | <br>         |
|                         |                    |         | <br>         |
|                         |                    |         | <br>         |
|                         |                    |         |              |
| Are you able to ride wi | thout this modific | ation?: | <br>         |
|                         |                    |         |              |

Comments regarding a reasonable modification request can be sent to rarequests@pvta.com or call 413-732-6248 ext. 205.